BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

Application or Docket Number,

40043001/EM

(Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
TC	TAL CLAIMS		1					RATE	FEE] [RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			/ minus 20≃		* 0			X\$ 9=	0	OR	X\$18=		
INDEPENDENT CLAIMS			/ minus 3 =		* <i>O</i>		ļ	X42=	υ	OR	X84=		
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT				,	+140=	J	OR	+280=		
* If	the difference	in column 1 is	ess than ze	ro, ente	r "0" in c	"0" in column 2		TOTAL	370.00	OR	TOTAL		
	C	Laims as a	Mended - Part II							•	OTHER THAN		
		(Column 1)		(Colur		(Column 3)	_	SMALL	ENTITY	OR	SMALL	YTITM	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	. ,	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	*	Minus	krit		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	T CL AIRA	=		X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
	· .				-								
AMENDWENT B	6 0 s	CLAIMS REMAINING AFTER AMENDMENT			BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		<u> </u> =		X42=		OR	X84=		
<u> </u>	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDEN	CLAIM			+140=		OR	+280=		
								TOTAL		OR	TOTAL ADDIT. FEE		
ADDIT. FEE ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	REMAINING N AFTER PRI		IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NO.	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	dependent		<u> </u>	T CL AIRA	=		X42=		OR	X84=		
<u></u>	+140=									OR	+280=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	TOTAL ADDIT. FEE		
		mber Previously Pa nber Previously Pa					er fou	nd in the app	ropriate box	(in co	lumn 1.		